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PTO/SB/21 (09-04)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/919217	
	Filing Date	07/31/2001	
	First Named Inventor	Sanders	
	Art Unit	2631	
	Examiner Name	Kumar	
Total Number of Pages in This Submission	10	Attorney Docket Number	A998

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Menlo Patent Agency LLC		
Signature	<i>David R. Gildea</i>		
Printed name	David R. Gildea		
Date	6/10/2005	Reg. No.	38,465

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature	<i>David R. Gildea</i>		
Typed or printed name	David R. Gildea	Date	6/10/2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Sanders

Title: Method for Determining Data Bit Transitions for a Low Level Spread Spectrum Signal

U.S. Serial No. 09/919217

Date Filed: July 31, 2001

Group Art Unit: 2631

Examiner: Kumar

Docket No. A998

FEE TRANSMITTAL FORM

	NUMBER OF CLAIMS AS AMENDED	CLAIMS AS PREVIOUSLY PAID	EXCESS CLAIMS	RATE	FEES
1201 Independent Claims	6	6	0	\$200	\$0
1202 Total Claims	20	22	0	\$50	\$0
Total					<hr/> \$0

X A check for the amount of the total is included herewith.


X The amount of the total is believed to be the correct fee due to the Patent Office for the filing of this correspondence. However, should the Patent Office determine that the amount of the total is in error, the Commissioner for Patents is authorized to deduct the amount of the deficiency or credit the amount of the extra in the deposit account number 071248. The name and address of the depositor are:

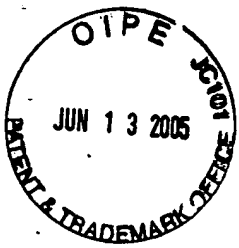
David Gildea
Menlo Patent Agency LLC
435 Hermosa Way
Menlo Park, California 94025

X A duplicate copy of this Fee Transmittal Letter is included herewith.

X The applicant believes that no extension of time period is required for this response. However, the applicant makes a conditional petition for extension of time to provide for the possibility that the applicant has inadvertently overlooked the need for such petition for extension of time.

Date: June 10, 2005


David R. Gildea, Reg. No.: 38,465
Menlo Patent Agency LLC



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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**Reply under 37 CFR 1.116
Expedited Procedure
Technology Center 2631**

Applicant: Sanders

Title: Method for Determining Data Bit Transitions for a
Low Level Spread Spectrum Signal

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Examiner: Kumar

Docket No. A998

Commissioner for Patents

AMENDMENT

This amendment of 6 pages numbered 1 to 6 is filed
in response to an Office action mailed 5/17/2005.